Sample letter of request to submit livescan fingerprint records

The following letter may be used as a model for requesting permission to submit fingerprint-based record checks to the Kansas Central Repository. Use your organization's letterhead stationery. Be sure to address all the points completely and accurately.

To: Kansas Bureau of Investigation
        Attn: Criminal History Records Section
        1620 SW Tyler
        Topeka, KS 66612-1837

The *[title of the company or organization]* requests approval to electronically submit fingerprint records to the KBI by means of livescan device. These fingerprint records will be used to identify individuals who are the subject of non-criminal justice criminal history record checks.

The purpose of these record checks is *[describe the reason and requirements, if any, for conducting these checks]*.

If approved for submission of livescan fingerprint records, the *[title of the company or organization]* will obtain livescan service by *[identify the livescan device and the owner/operator of the device. If your organization will be using another agency's livescan services, be sure to include the details of the relationship and the conditions under which your organization will be supported.]*

[If your organization will be obtaining a livescan device, describe the model and whether or not your organization has verified that the device is compliant with the Kansas Criminal Justice Information Systems (KCJIS) standards and protocols. Include enough detail to show that the livescan device will be capable of transmitting and receiving messages and records in the KCJIS network environment.]

We anticipate the average volume of record checks will be about *[include the weekly or monthly total of submissions that your organization expects]*.

[If your organization is applying for designation as a "Caregiver" agency for reduced record check rates, indicate that here and refer to the <mark>*Caregiver Account Application*</mark>*. Attach that application to this letter.]*

The point-of-contact for *[title of the company or organization]* is *[name and contact information]*.

[Signature and signature block of a person entitled to represent the organization]